

**Application for Membership to the P & J Galea  
Superannuation Fund ('the Fund')**

I, Silvana Galea  
of 197 Eastwood Rd Leppington

hereby apply for membership of the Fund and consent to becoming a member of it. I confirm that I am not aware of any impediment to my becoming a member. I acknowledge that I have read the product disclosure statement including any written or audiovisual information provided to me.

I agree, upon acceptance of my membership to:

1. Be bound by the terms of the deed and all of the rules of the Fund;
2. Be bound by all decisions of the trustee of the fund including decisions that may impact upon my membership benefits provided those decisions are made in accordance with the rules of the fund, the superannuation laws and the trustee laws;
3. Be a trustee or a director of the trustee company unless there is a specific trustee exemption in place in respect of my membership under the superannuation laws;
4. Provide information to the trustee where required including medical information enabling the trustee to facilitate any death or disablement insurance on my behalf;
5. Provide my tax file number to the trustee provided the trustee abides by the laws relating to the collection and dissemination of my tax file number;
6. Consent to the trustee to hold that information despite anything to the contrary in the privacy legislation;
7. Provide the trustee, within a reasonable period of time a detailed death benefit plan that may include a binding death benefit nomination;
8. Ensure that at the time of making any super contributions, transfers or rollovers that those contributions, transfers and rollovers are made in accordance with the superannuation laws;
9. Notify the trustee where I become disabled, retired, have reached preservation age or meet some other condition of release of my benefits from the preservation rules.
10. Notify the trustee where I become separated from my spouse, if I have one and the separation is deemed by either spouse to be irreconcilable.

I nominate the following Dependants (spouse or children) to be entitled to any benefit that I may have in the Fund upon my death:

Name	Relationship	% of Benefit
<del>Silvana Galea</del>	J	
John Galea	Husband	100%

The above is in place until I provide the trustee, a detailed death benefit plan as noted at 7. above.

Date of Birth: 12 / 6 / 1976 Tax File Number: \_\_\_\_\_

Signed S. Galea Date 5-7-2016

# Unit Certificate

## The Galea Investment Unit Trust

Certificate Number : 1

This is to certify that the table below is the registered holder of the number of units below mentioned in "The Galea Investment Unit Trust". This certificate is re-issued due to resignation of Glensung Pty Ltd as trustee of the P & J Galea Superannuation Fund and appointment of PJ Galea Superfund Pty Ltd as a new trustee on 1<sup>st</sup> December 2013.

Type of unit	Number of units applied
Fully paid units \$1.00 each	100
The units will be held by	P J Galea Superfund Pty Ltd
The Beneficial owner of units	P & J Galea Superannuation Fund

Signed for and on behalf of the Trustee

Date: 13-12-13 

Signature: John Galea  
Name of Trustee

### Important

*Please note that the trust deed imposes restrictions to transfer these units and this certificate must be attached to application to transfer any units comprised therein.*